

# Cut Christmas Tree Field Inspection Application

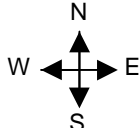

AGREEMENT NUMBER \_\_\_\_\_

Results: Passed

Restricted -

Full

Partial

Firm Name _____				Contact Person _____			
Mailing Address _____				Day Time Phone (____) _____			
City _____ State ____ Zip Code _____				Evening Phone (____) _____			
<b>FIELD INFORMATION</b>				<b>TREES TO BE INSPECTED/SHIPPED</b>			
Field Name: _____ County Name: _____ Township Name: _____ Townline No.: _____ Range No.: _____ Section No.: _____ ¼ Section: _____ Lat. / Long. _____				<b>Tree Species</b>		<b>No. to be Shipped</b>	<b>Acres in Block</b>
				1.			
				2.			
				3.			
				4.			
				5.			
<div style="display: flex; align-items: center;"> <div style="border: 1px dashed gray; padding: 5px; margin: 5px;"> <div style="text-align: center;">FIELD MAP</div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px dashed gray; padding: 5px; text-align: center;">40 ACRES</div> <div style="border: 1px dashed gray; padding: 5px; text-align: center;">40 ACRES</div> </div> <div style="border: 1px dashed gray; padding: 5px; text-align: center;">40 ACRES</div> <div style="border: 1px dashed gray; padding: 5px; text-align: center;">40 ACRES</div> </div> <div style="margin-left: 20px;">  <div style="margin-top: 10px;">Region No.: _____</div> </div> </div>				<b>MAP INSTRUCTIONS</b>			
				Draw only one map per field. If you have more than one field in this square mile Section, use another form. Show roads, access routes, and landmarks. Incomplete maps will be returned and may cause inspection delays.			
				<b>BILLING INFORMATION</b>			
				<b>TIME CHARGED:</b> <b>MILEAGE:</b> <b>TOTAL:</b> <b>GRAND TOTAL:</b>			
<div style="display: flex; align-items: center;"> <div style="border: 1px dashed gray; padding: 5px; margin: 5px;"> <div style="text-align: center;">¼ SECTION</div> </div> <div style="margin-left: 20px;">  </div> </div>				<b>THIS IS NOT A BILL</b>			
				<b>RECORD OF INSECTICIDE TREATMENT</b>			
Species Treated		Application Date(s)		Application Rate		Pesticide Used & EPA Reg. No.	
1.							
2.							
3.							
4.							
5.							
6.							
Inspector (print): _____				Inspector (signature) _____		Date: _____	